

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL045115	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 08/17/2018
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NAME OF PROVIDER OR SUPPLIER CHERRY SPRINGS VILLAGE	STREET ADDRESS, CITY, STATE, ZIP CODE 358 CLEAR CREEK ROAD HENDERSONVILLE, NC 28792
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments Report of Biennial Construction Survey by Dennis Harrell on 8-17-2018. Records indicate this facility was first licensed on 5-28-1997, for 60 beds. Based on this information, the facility was surveyed for conformance with the 1996 edition of the North Carolina State Building Code, Institutional Occupancy, the 1996 Rules for Homes for the Aged and Infirm Minimum Desired Standards and Regulations and the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds.	C 000		
C 135	Bathrooms-Not to Be Utilized for Storage SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (10) Resident toilet rooms and bathrooms shall not be utilized for storage or purposes other than those indicated in Item (4) of this Rule; This Rule is not met as evidenced by: Based on observation, the community bathroom with the accessible tub was being used for storage. Finding on 8-17-2018; There were several mattresses and other items stored in the bathroom with the tub.	C 135	All storage items will be removed from community bathroom and no items will be stored in Community Bath	9/29/18
C 150	Corridors-Free of equipment and Obstructions SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT	C 150		

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X8) DATE

Amy Hamilton, Executive Director 9/10/18

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C 150	Continued From page 1 (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions. This Rule is not met as evidenced by: Based on observation, the corridor was not maintained free of obstructions. At least 6 feet of clear width must be maintained in exit corridors. Finding on 8-17-2018: There was a cart stored in the corridor reducing the clear width to about 3.5 feet.	C 150	<i>Cart in corridor was an employee passing snacks to residents. Employee made aware cart can not be left unattended in hallways</i>	<i>9/28/18</i>
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the building was not maintained free of obstructions and hazards. An obstructed exit could delay or prevent an evacuation in an emergency. Finding on 8-17-2018: The facility front door has Special Locking (magnetic locking) and is shown on the evacuation plan as a required exit. An emergency release switch for the magnetic locking is provided, as required by Code, however, the cover over the release switch was found to be screwed shut making the required release switch inaccessible. Note; This deficiency was corrected during the	C 166	<i>Corrected during survey - 9/28/18</i>	

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C 166	<p>Continued From page 2 survey.</p> <p>2. Based on observation, the building was not maintained in a safe manner by not properly handling portable medical oxygen cylinders. This could affect all residents, staff and visitors if cylinders fall, breaking their valves, propelling the cylinder and turning it into a dangerous projectile. Findings on 8-17-2018: a. Several (8) portable medical oxygen cylinders were stored in an unapproved plastic crate. b. Several (6) portable medical oxygen cylinders were stored on a shelf in no container at all.</p> <p>3. Based on observation, an exterior exit path was not maintained uncluttered and free of obstructions. Finding on 8-17-2018; The exit ramp at the rear of the facility near room 21 was obstructed with a chair. Note; This deficiency was corrected during the survey.</p> <p>4. Based on observation, there was no key onsite to allow entry into the beauty parlor to survey for hazards.</p>	C 166	<p>DME provider for oxygen tanks was called and extra metal crates brought to facility to secure oxygen tanks in oxygen storage closet</p> <p>Corrected during survey</p> <p>Extra master key will be made available for entrance to beauty parlor</p>	9/28/18
C 185	<p>Fire Safety-Rehearsals on Each Shift</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION</p> <p>(b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official.</p> <p>(c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the</p>	C 185		9/28/18

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C 185	Continued From page 3 shift, staff members present, and a short description of what the rehearsal involved. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: Based on a review of documents, the records available onsite included no description of what the rehearsal involved.	C 185	<i>Firedrills will include a description of what the rehearsal involved</i>	<i>9/28/18</i>
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation, corridor doors are prevented from closing quickly and latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings on 8-17-2018; a. The one hour fire rated door to the large laundry was held open with a chain and with a permanent magnet. Note; This same door was found held open with a screen door hook during the survey of 10-26-2016 and was found wedged open on 5-28-2014. This fire rated door must be	C 189	<i>Magnet and chain removed from fire door</i>	<i>9/28/18</i>

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C 189	<p>Continued From page 4</p> <p>self-closing or automatic closing on activation of the fire alarm system and must automatically latch when closed.</p> <p>b. The latchbolt was found to be disabled with paint on the same one hour fire rated door to the large laundry. Note; This deficiency was corrected during the survey.</p> <p>c. The other door to the main laundry is 3/4 hour fire rated and will not automatically latch when closed.</p> <p>d. The door to the dining room will not latch when closed.</p> <p>e. The door to room 35 will not latch when closed.</p> <p>f. One of the doors to the Library was blocked from being able to close by a large heavy chair. Note; This deficiency was corrected during the survey.</p> <p>2. Based on observation, the facility was not maintained in a safe condition because of combustible storage in an unapproved space. Findings on 8-17-2018; Many combustibles, including several mattresses, cardboard boxes, plywood etc. were stored in the crawlspace basement. This space is not separated with a one-hour ceiling or walls and cannot be used for storage of combustibles.</p>	C 189	<p>Request for door to be electro magnetic locked w/ fire system placed w/ maintenance —</p> <p>corrected during survey</p> <p>c. door latch repaired to close completely</p> <p>d. door latch repaired to close completely</p> <p>e. door latch repaired to close completely</p> <p>f. corrected during survey —</p> <p>Administrator to monitor and keep clear corridors + fire exits</p> <p>2. Combustibles will be removed from basement and storage will be available in storage building in back parking area —</p>	<p>9/28/18</p> <p>9/28/18</p> <p>9/28/18</p> <p>9/28/18</p>

EXISTING HOME FOR THE AGED

1984 REVISED REGULATIONS

FID _____

Facility Name Cherry Spring Village Survey Date _____

Sprinkler & type? _____ Generator _____ Type Const. _____

Original licensure date _____ Mag locks? _____ Delayed Egress _____

Fire Alarm System

_____ Pull station near each exit _____ Sounding devices audible

Mag Locks OK

_____ Smoke detectors in corridors 30/60

Detectors: _____ storage _____ kitchens _____ dining _____ laundry _____ living

Emer. Dispatch # _____ Name or badge # _____

_____ Other: time alarm in _____ time received _____

_____ F.A. automatic transmits signal (time: _____)

_____ All F.A. devices interconnected

_____ Fire drills 3/shift

J	F	M	A	M	J	J	A	S	O	N	D
1	3	2	1	3	2	1		1	1	3	2

enough but no descrip

- 10-3-77 Fire Alarm Inspection
- 97-4-30-18 Sanitation Bldg 95.5 8/6-18 Sanitation Kitchen
- 3-2-18 Sprinkler Inspection
- _____ Fire Marshal Inspection

_____ F.A. emergency power _____ 1 1/2 hr. battery lights/egress

Kitchen:

_____ F.A. suppression

_____ Bedrooms - _____ # Licensed beds _____ #beds set up

_____ Electrical outlets in wet locations GFI

_____ Toilet/Lavatory each 5 residents _____ Tub/Shower each 10 residents

_____ Staff toilets _____ Visitor toilets _____ Combination Staff/Visitor 12

_____ Privacy Curtain

_____ Grab bars at _____ Toilets _____ Tubs/Showers

FE OK

_____ Hot water temperature 100 - 110 degrees 110°

_____ 3x3 bath w/roll-in shower (After 1977)

_____ Draft Stops (3000 sq. ft.)

Storage 40 cu.ft. (5 sq.ft. X 8') per resident
Separate storage of clean & soiled
Drug Storage _____ Lavatory
Doors must not swing in corridors _____ Latch
Handrails _____ 36" _____ Secure
Night lighting unswitched
Handrails on stairs, steps, porches
Electric heaters Guards _____
Locks - Open by one (1) motion
Portable electric heaters (not permitted)

Natural ventilation (or mech) for _____ soiled, _____ Utility _____ J.C. _____ Laundry _____ Baths

Fire Extinguishers _____ 1 - 10#/2500 sq.ft.

_____ 1 ## Kit (Or CO)

_____ Fire Evacuation Plan Posted

_____ copy of floor plan

_____ O2 storage

8 in plastic crate on shelf in hallway

exit near 21 obstructed with chair Corr onsite

Chair blocking door from closing in "Library" corr onsite

No key onsite to Beauty

This corr on:
↓

(1 hr door to Large Laundry tied open with chain, Latch was disable
and has perm magnet at first
Other $\frac{3}{4}$ hr door to Laundry will not auto latch

(front door is obvious exit, has mag lock, cover over switch screwed
12 " " marked on evac plan as exit - corr onsite shut

dining door will not latch, #35 (

snack cart left in corr, \approx 3.5 ft clear